Amended Application	Initial Amer	
Date: 6/2/22		



## City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

Candidate's Name (required):					
Candidata's Name (required):					
Dandidate S Name (required);	r.š	0			
Candidate's mailing address (required):	09 13	union."			
	graders and a second				
		-17			
	E N E				
□ Mayor □ Council Member, Ward					
nt (year the election will take place) (required):					
□ Democrat □ Libertarian □ Republican □ Other:					
	- DAG				
Tucson Metro Chambe	r PAC				
Political Function (optional):       □ Contributions       □ Candidate-Related Independent Expenditures         (select any that apply)       □ Ballot Measure Expenditures       □ Recall Expenditures					
Sponsor's name or nickname (required):	son Metro Chamber				
Sponsor's mailing address (required):	PO Box 991				
oponiosi a sirian additoto (roddirod).					
epender a priorite manneer (ii dirij).					
with Secretary of State Separate Segregated Fund of Standing Committee (must also complete)	ete separate standing committee registra	ition)			
		*			
	E (5)				
and the second s					
	Candidate's email address (required):	Candidate's email address (required):  Candidate's phone number (required):  Candidate's website (if any):  Mayor Council Member, Ward  It (year the election will take place) (required):  Democrat Libertarian Republican Other:  Ittee (PAC)  Tucson Metro Chamber PAC  Contributions Candidate-Related Independent Expenditures  Recall Expenditures  Recall Expenditures  Sponsor's name or nickname (required):  Tucson Metro Chamber  PO Box 991  Sponsor's email address (required):  Sponsor's phone number (if any):  Sponsor's website (if any):  Www.tucsonchamber.org  Www.tucsonchamber.org			





Committee's mailing address (required): \_\_\_\_\_

Committee's email address (required):

## City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

PO Box 991

ascholl@tucsonchamber.org

COMMITTEE ID NUMBER (office use only)

17-271-CT

## COMMITTEE INFORMATION:

Contact Information:

	Committee's phone number (if any):	(520) 879-0041	
	Committee's website (if any):		
Chairperson's Information:	Chairperson's name (required):	Column and Management	
	Chairperson's physical address (required):	2710 N. Camaball Ave	
	Chairperson's mailing address (if different):	PO Box 991, Tucson, AZ 85702	
	Chairperson's email address (required):		
	Chairperson's phone number (required):		
	Chairperson's employer (required):	F= ( 184 AD ( 1 A )	
	Chairperson's occupation (required):	Owner	
Treasurer's Information:	Treasurer's name (required):	T. VanHook Schuld	
	Treasurer's physical address (required):	3501 N. Mountain Ave	
	Treasurer's mailing address (if different):	PO Box 991, Tucson, AZ 85702	
	Treasurer's email address (required):	tvanhook@habitattucson.org	
	Treasurer's phone number (required):		
	Treasurer's employer (required):		
	Treasurer's occupation (required):	CEO	
Bank or Financial Institution	A CONTRACTOR OF THE PROPERTY O		
(do not list acct numbers)			
	Additional bank name (if applicable):		
DECLARATION AND SIGNA	TURES:		
chairperson or treasurer of committee and authorize it campaign finance and repo	the committee named herein, if applicable; (2) to receive/make contributions/expenditures on orting guide; (4) agree to comply with Arizona e (5) agree to accept all notifications and legal s	and correct. I further declare that I: (1) consent to serve as designate the above-named committee as my official candidate my behalf, if applicable; (3) have read the Secretary of State's lection law, including campaign finance laws codified at A.R.S. ervice of process for campaign finance purposes via the email	
Chairperson's signature: _		Date: 5/17/22	
Treasurer's signature:	Vous tools	Date: 5/17/22	
Candidate's signature (if ap	plicable):	Date:	